1	UDICIAL CA CAMPAIGN F	FORM JC/OH COVER SHEET PG 1							
The JC/OH INSTRUCTION GUIDE explains how to complete this form.			1 ACCOUNT # (Ethics Commission filers) 00051821	2 PAGE # 1 of 3					
3	CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Hon. Brenda P.	МІ	OFFICE USE ONLY					
	NAME	NICKNAME LAST Kennedy	SUFFIX	Date Received					
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; Control of the con	CITY; STATE; ZIP CODE	Date Hand-delivered or Dale Rostmarked					
	Change of Address			070 1: 46					
5	CAMPAIGN	MS/MRS/MR FIRST	MI	Receipt # Amount					
J	TREASURER	Mr. Edward		Date Processed					
	NAME	nickname Last Taylor	Date Imaged						
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUI' 278 Campfire Way Smithville, TX 78957	TE#: CITY: STATÉ;	ZIP CODÉ					
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 360-3402	EXTENSION						
8	REPORT TYPE	X January 15 30th day before election July 15 8th day before election		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)					
9	PERIOD	Month Day Year	Month Day	Year					
	COVERED	THROI 07/01/2008	идн 12/31/200)8					
10	ELECTION	Month Day Year Signal Election TYPE Signal S		General Special					
11	OFFICE	OFFICE HELD (if any) District Judge District 403	12 OFFICE SOUGHT (if known) District Judge District	t 403					
13	NOTICE OF DIRECT CAMPAIGN EXPENDITURE	Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure.							
	BY OTHER INDIVIDUALS	Name							
	additional pages	Address/PO Box; Apt. / Suite #; City; State; Z	Zip Code						
	GO TO PAGE 2								

exas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070			(512)46	63-5800 1-800-325-850	
POLITI	CAL EXPENDITUR	RES			SCHEDULE F
The Instruction	ON GUIDE explains how to complete t		1 PAGE# Schedule: 1/1 Report: 3/3		
2 FILER NAME	Kennedy, Brenda P. (Hon.)			3 ACCOUNT # 00051821	(Ethics Commission filers)
4 Date	5 Payee name Austin Chapter of the Links Ir	ndation		7 Amount (\$)	
09/22/2008		\$85.00			
8 Purpose of pay required.) Fundraiser Contri	yment (See instructions regarding type	of information	9 · · Complete if direct Candidate / Officehol	t expenditure to ben der name:	efit Candidate/Officeholder
	f travel outside of Texas, complete S	Schedule T)	Office sought: Office held:		

Signature of officer/administering path

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Kenr	15 ACCOUNT # (Et 00051821	` ,				
16 NOTICE FROM	This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures					
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	MMITTEE TYPE COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS				
7 CONTRIBUTION		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.67		
	2. TOTAL	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.67		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED			118.00		
	4. TOTAL POLITICAL EXPENDITURES			203.00		
CONTRIBUTION BALANCE	5. TOTAL F	\$	3,595.74			
OUTSTANDING LOAN TOTALS	6. TOTAL F	\$	0.00			
8 AFFIDAVIT	<u> </u>	I swear, or affirm, under penalty is true and correct and includes		, , , , ,		
The state of the s	LISA M. EUFRAC Notary Public STATE OF TEXA mmission Exp. 09-08	S Brenda P. Kennedy	andidate or Officeholde	in		
AFFIX NOTARY S	STAMP / SEAL ABOV	E				
, ,		ne said <u>Blenda Pikeuned</u> tify which, witness my hand and seal of office.	this the	34 day		
/ /			Notane Pul			

Print name of officer administering oath

Title of officer administering oath